

PURSUIT REPORT

CHP 187 (Rev. 4-98) OPI 042

PURSUED VEHICLE LICENSE NUMBER

STATE

NUMBER - For CHP Use Only

P

NUMBER - Other Agency Use Only

NOTE: ALL CALIFORNIA LAW ENFORCEMENT AGENCIES: DESTROY PREVIOUS EDITIONS.

IMPORTANT - READ CAREFULLY

Vehicle Code Section 14602.1 requires that "every state and local law enforcement agency, including, but not limited to, city police departments and county sheriffs' offices, shall report to the Department of California Highway Patrol, on an approved form, all vehicle pursuit data." This form has been developed to record this information.

The definition of "vehicle pursuit" and instructions for completing and submitting this form are on the reverse side of this page.

SECTION I - THIS SECTION IS MANDATORY FOR ALL CALIFORNIA ENFORCEMENT AGENCIES

A. CHP AREA / AGENCY NAME	B. AGENCY NCIC	C. DATE OF PURSUIT	D. TIME OF PURSUIT	E. TOTAL TIME OF PURSUIT (Minutes)
F. DID YOUR AGENCY / AREA INITIATE THE PURSUIT?	G. I.D. NUMBERS OF OFFICERS INVOLVED (Do Not List Names)			H. TOTAL PURSUIT LENGTH (Distance)
a. <input type="checkbox"/> Yes b. <input type="checkbox"/> No				

I. IF THE SUSPECT ☐ WAS ☐ WAS NOT APPREHENDED, WHICH ONE OF THE FOLLOWING MOST NEARLY DESCRIBES THE EVENT **TERMINATING** THE PURSUIT?

- | | | |
|--|---|---|
| a. <input type="checkbox"/> Pursued driver voluntarily stopped | e. <input type="checkbox"/> Pursuit aborted by law enforcement agency | i. <input type="checkbox"/> Pursuit continued by another CHP Area/allied agency |
| b. <input type="checkbox"/> Forcible stop | f. <input type="checkbox"/> Pursued vehicle and pursuing vehicle collided | j. <input type="checkbox"/> Pursued vehicle escaped pursuing vehicle |
| c. <input type="checkbox"/> Pursued vehicle became disabled | g. <input type="checkbox"/> Pursued vehicle involved in collision | k. <input type="checkbox"/> Driver abandoned vehicle and fled on foot |
| d. <input type="checkbox"/> Pursuing vehicle became disabled | h. <input type="checkbox"/> Pursuing vehicle became involved in collision | l. <input type="checkbox"/> Other: _____ |

J. ORIGINAL VIOLATION OBSERVED BY CHP AREA/AGENCY INITIATING THE PURSUIT (LEAVE THIS SECTION BLANK IF YOUR CHP AREA/AGENCY DID NOT INITIATE PURSUIT)

SECTION: _____ CODE: _____ a. ☐ Felony b. ☐ Misdemeanor c. ☐ Infraction d. ☐ Other: _____

K. MOST SERIOUS VIOLATION SUSPECT(S) CHARGED WITH UPON TERMINATION OF THE PURSUIT (Do **NOT** use 2800.1, 2800.2, or 2800.3 CVC)

SECTION: _____ CODE: _____ a. ☐ Felony b. ☐ Misdemeanor c. ☐ Infraction d. ☐ Other: _____

L. WERE THERE ANY INJURIES INCURRED AS A RESULT OF A COLLISION? ☐ Yes ☐ No

If yes, indicate the number of each type of injury:

	Police Officer(s)	Suspect(s)	Other(s)
Fatal Injury	_____	_____	_____
Severe Injury	_____	_____	_____
Other Visible Injury	_____	_____	_____
Complaint of Pain	_____	_____	_____

M. WERE ANY INJURIES INCURRED AFTER THE VEHICLE PURSUIT? ☐ Yes ☐ No

If yes, indicate the number of each type of injury:

	Police Officer(s)	Suspect(s)	Other(s)
Fatal Injury	_____	_____	_____
Severe Injury	_____	_____	_____
Other Visible Injury	_____	_____	_____
Complaint of Pain	_____	_____	_____

SECTION II - THIS SECTION IS MANDATORY FOR CHP

CHP ONLY - REFER TO HPM 70.6, CHAPTER 5, FOR INSTRUCTIONS ON COMPLETING SECTION II AND THE NARRATIVE/CRITIQUE

N. LOCATION / ROUTE(S) AND NAME OF SUSPECT(S)

O. CHP AREA/AGENCY INITIATING THE PURSUIT	P. CHP PARTICIPATION REQUESTED? a. <input type="checkbox"/> Yes b. <input type="checkbox"/> No c. <input type="checkbox"/> N/A	Q. NAME OF REQUESTING PERSON
R. NAME OF SUPERVISOR IN CHARGE	S. TIME NOTIFIED	T. SUPERVISORY INVOLVEMENT IN PURSUIT a. <input type="checkbox"/> In Pursuit b. <input type="checkbox"/> Via Radio c. <input type="checkbox"/> Via Telephone d. <input type="checkbox"/> None
U. HIGHEST NUMBER OF CHP UNITS IN PURSUIT AT ONE TIME Ground _____ Air _____	V. NUMBER OF ALLIED AGENCY UNITS INVOLVED Ground _____ Air _____	W. OTHER CHP AREAS INVOLVED (Enter 4-digit NCIC's)
X. ROADWAY TYPE - MAXIMUM SPEED ATTAINED <input type="checkbox"/> Maximum Freeway Speed: _____ <input type="checkbox"/> Maximum Surface Street Speed: _____		

Y. TYPE OF FORCIBLE STOP

- a. ☐ None b. ☐ Spike Strip c. ☐ PIT d. ☐ Other ramming e. ☐ Boxed-in f. ☐ Remote engine disabler g. ☐ Other (road block, channelization, etc.)

Z. PURSUED VEHICLE TYPE

- a. ☐ Automobile b. ☐ Truck Tractor/Trailer c. ☐ Motorcycle d. ☐ Pickup/Van e. ☐ Other: _____

IF THIS IS THE **CONSOLIDATED REPORT** FOR MULTI-CHP AREA/AGENCY PURSUIT, WHAT WAS:

Total Elapsed Time: _____ Minutes NCIC Number of CHP Area/Agency submitting the consolidated report: _____

Total Elapsed Distance: _____ Miles

DATE COPY OF CHP 187 FORWARDED TO:

☐ Division _____

SUPERVISOR'S SIGNATURE

COMMANDER'S SIGNATURE

DIVISION APPROVAL

INSTRUCTIONS - READ CAREFULLY

Vehicle Pursuit Defined: An event involving one or more law enforcement officers attempting to apprehend a suspect operating a motor vehicle while the suspect is attempting to avoid arrest by using high speed driving or other evasive tactics, such as driving off a highway, turning suddenly, or driving in a legal manner but **willfully failing to yield** to the officer's signal to stop.

INSTRUCTIONS FOR COMPLETING THIS FORM

PLACE PURSUED VEHICLE LICENSE NUMBER AND LOCAL PURSUIT REPORT NUMBER IN THE BOXES PROVIDED AT TOP OF FORM. WHEN THERE IS NO LICENSE PLATE ON THE PURSUED VEHICLE, ENTER THE LAST SEVEN-DIGITS OF THE VEHICLE IDENTIFICATION NUMBER (VIN) IN THE **PURSUED VEHICLE LICENSE NUMBER** BOX.

- A. **CHP Area/Agency Name** - Enter the name of the CHP Area or allied law enforcement agency **completing this form**.
- B. **CHP Area/Agency NCIC** - Enter the four-digit NCIC number for the **CHP Area/Agency completing this form**.
- C. **Date of Pursuit** - Enter the **date the pursuit was initiated** by the first CHP Area/Agency involved.
- D. **Time of Pursuit** - Enter the time the **pursuit actually began** (i.e., when the enforcement stop was initiated). If your CHP Area/Agency was not the initiating agency, **contact the initiating CHP Area/Agency** to correctly enter this time.
- E. **Total Time of Pursuit** - Enter the total time **in minutes** your CHP Area/Agency was involved in the pursuit.
- F. **Did Your CHP Area/Agency Initiate the Pursuit?** - Check the box indicating whether **your** CHP Area/Agency initiated the pursuit.
- G. **I.D. Numbers of Officers Involved** - Enter only the I.D. numbers of the officers **from your CHP Area/Agency** involved in the pursuit.
- H. **Total Pursuit Length** - Enter the total distance in miles **your** CHP Area/Agency was involved. (*Round off to the nearest mile.*)
- I. **If the Suspect Was, Or Was Not Apprehended, Which One of the Following Most Nearly Describes the Event Terminating the Pursuit?** - Indicate whether or not the suspect was apprehended within your CHP Area/Agency's jurisdiction and check the one box that most nearly describes the event terminating the vehicle pursuit. If the pursuit was terminated by an event not listed, check the "other" box and write a short description of the event (e.g., the suspect vehicle was "cornered" in an alley). A "forcible stop" is defined as the use of physical force or presence (e.g., roadblock, ramming, boxing-in, channelization, Pursuit Immobilization Technique [PIT], etc.).
- J. **Original Violation Observed by CHP Area/Agency Initiating the Pursuit** - Enter the applicable section and code, and check the appropriate box for the violation observed by the CHP Area/Agency that initiated the traffic stop/pursuit (not always CVC). If your CHP Area/Agency did not initiate the pursuit **leave this section blank**. ("Other" category includes suspicious vehicles, warrants, etc.).
- K. **Most Serious Violation Suspect(s) Charged With Upon Termination of Pursuit** - Enter the single most serious violation and the code (i.e., felony over misdemeanor) and check the appropriate box for which the suspect(s) was arrested at the end of the pursuit. 2800.1, 2800.2, or 2800.3 CVC should not be used as this violation relates only to the act of evading and does not describe the **reason** for the pursuit.
- L. **Were There Any Injuries Incurred as a Result of a Collision?** - If a collision occurred as a result of the vehicle pursuit **while your CHP Area/Agency was involved**, check the "yes" box. If a collision occurred as a result of the vehicle pursuit **before or after your CHP Area/Agency was involved**, check the "no" box. If the "yes" box is checked, indicate the **number of each type of injury** corresponding to the victim type (Police Officer, Suspect, or Other). "Suspect" includes all occupants of the pursued vehicle. ("Other" includes any other victim of the vehicle pursuit (i.e., collision with other party, bystander, etc.).
- M. **Were Any Injuries Incurred After the Vehicle Pursuit?** - If any injuries were incurred by officers, suspects, bystanders, etc., as a result of any event occurring after the pursuit (e.g., foot pursuit, arrest, shooting), and while your CHP Area/Agency was involved, check the "yes" box. Indicate the **number of each type of injury** corresponding to the victim type.

Completed form should be mailed or FAXED (916) 375-2852, to:

California Highway Patrol
P. O. Box 942898
Sacramento, CA 94298-0001
Attention: Production Controls Unit

Questions concerning the completion of this form should be directed to the California Highway Patrol, SWITRS Liaison Unit at (916) 375-2838.
